

CACFP Report of Actual Expenditures

For the contract period ending September 30, 2008

This report is a part of your contract and must be submitted at the close of the contract term. This report of expenditures must compare the actual expenditures to the approved budgeted amounts for FY08 (October 1, 2007 through September 30, 2008) Send to: Child and Adult Care Food Program, PO Box 202925, Helena, MT 59620-2925 by December 1, 2008.

EXPENDITURE CATEGORIES FOR CACFP OPERATION AND ADMINISTRATION	Submitted Budgeted Amounts FFY 2008 Oct 1, 2007 - Sept 30, 2008	Actual Expenditures FFY 2008 Oct 1, 2007 - Sept 30, 2008	
Food Service Labor (Cook's Salary, etc.)			
CACFP related Staff & Children's Training Costs			
Milk [DO NOT COMBINE WITH FOOD]			
Food [DO NOT COMBINE WITH MILK]			
Cleaning Supplies (Dishwashing Detergents, Sanitizing Solutions, etc.)			
Nonfood Supplies (Napkins, Straws, Disposable Dishes, etc.)			
Administrative Costs (Related to the CACFP)			
** General Liability & Workers' Compensation Insurance	xx	XX	
** Overhead (Rent, Utilities)	XX	XX	
TOTAL			
**These expenditure categories are not allowable CACFP expenses, but necessar	ry for the operation of the Program	n.	
LIST THE INSTITUTION'S THREE MAJOR SOURCES OF	INCOME D	OLLAR AMOUNT	
Child and Adult Care Food Program or :			
Child/Family Service Contract/s or:			
Grants and Donations or:			
	TOTAL		
Center's Name			
Authorized Representative's Printed Name	Printed Title		
Authorized Representative's Signature	Date		
State use or State Approval:YesNo	only Montana CACFP Specialist Initials		